PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or	Docket	Number
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09/342408

Column 1 Column 2 TYPE	CLAIMS AS FILED - PART I							SMALL	ENTITY		OTHER	THAN		
### ### ### ### ### ### ### ### ### ##							OR							
TOTAL CLAIMS Minus 20	FOR NUMBER FILED				NUMBER	EXTRA		RATE	FEE	1	RATE	FEE		
INDEPENDENT CLAIMS 3 minus 3 = * MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS AFTER PREVIOUSLY PAID FOR PRESENT AMENDMENT PREVIOUSLY PAID FOR PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS AFTER PRESENTATION OF MULTIPLE DEPENDENT CLAIM * Independent * Minus ** =	BASIC FEE										380.00	OR		760.00
MULTIPLE DEPENDENT CLAIM 3 minus 3 = *	TC	TAL CLAIMS		25	minus :	20=	· 5			X\$ 9=		OR	X\$18=	90,00
* If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS HIGHEST PRESENT * AMENDMENT PREVIOUSLY PART * Independent Minus	INE	DEPENDENT CL	AIMS	3	minus	3 =	*			X39=		OR	X78=	,,,
TOTAL OR TOT	MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
CLAIMS AS AMENDED - PART	* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTAL			TOTAL	850. W
Column 1 Column 2 Column 3	CLAIMS AS AMENDED - PART II													
REMAINING			(Col	umn 1)				(Column 3)		SMALL	ENTITY	OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=	ENTA	4	REM AF	AINING TER		PR	NUMBER EVIOUSLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=	NON	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
Column 1)	AME		L			L		=		X39=		OR	X78=	
Column 1)		FIRST PRESE	NIAIIC	ON OF MI	JLTIPLE DEF	PEND	ENT CLAIM	J		+130=		OR	+260=	
Column 1) Column 2 Column 3 RATE ADDI- RATE TIONAL FEE ADDI- RATE TIONAL FEE TOTAL ADDIT. FEE ADDIT. F									L	TOTAL				
Total * Minus *** = X39= OR X\$18= Column 1) Column 2) Column 3) Column 3 Column 4 Column 4 Column 5 Column 6 Column 7 Column 7 Column 7 Column 7 Column 8 Colu			(0.1			,		(0.1	Α	DDIT. FEE			ADDIT. FEE	
REMAINING AFTER PREVIOUSLY PAID FOR TOTAL AMENDMENT PRESENT EXTRA Total * Minus *** =					· [(Column 3)					1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	ENT B		AF	TER		PR	EVIOUSLY			RATE	TIONAL		RATE	TIONAL
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	NDM	Total	*	_	Minus	**		=		X\$ 9=		OR	X\$18=	
+130 = OR +260 = TOTAL OR ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL OR TOTAL ADDIT. FEE TOTAL ADDIT. FEE	AME		<u> </u>	N OF M				=		X39=		OR	X78=	
COlumn 1) (Column 2) (Column 3) CLAIMS REMAINING NUMBER PRESENT EXTRA AFTER AMENDMENT PREVIOUSLY PAID FOR FEE Total * Minus *** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE ADDIT. FEE OR ADDIT. FEE ADDIT. FEE		MOT PRESE	MIAIIC	ON OF MIC	DETIPLE DEF	END	ENT CLAIM			+130=		OR	+260=	
Column 1) (Column 2) (Column 3) CLAIMS									L Al			OR		
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus *** =			(Colu	umn 1)		(C	olumn 2)	(Column 3)						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."		,	REM. AF	AINING TER	°°	PR	IUMBER EVIOUSLY			RATE	TIONAL		RATE	ADDI- TIONAL FEE
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	<u> </u>	FIRST PRESE	NTATIC	N OF ML	ILTIPLE DEF	PEND	ENT CLAIM		-	,,,,,,		OR	77.02	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE	* 1	f the entry in colur	nn 1 is la	ess than th	e entry in colu	mn 9	write "O" in col	umn 3				OR		
	**	If the "Highest Nur If the "Highest Nur	nber Pre mber Pre	eviously Pa eviously Pa	id For" IN THIS iid For" IN THIS	S SPA S SPA	CE is less thar CE is less tha	n 20, enter "20." n 3, enter "3."	~L	DDIT. FEE		•	ADDIT. FEE	